



---

## SPECIMEN COLLECTION FOR POTENTIAL CASES OF SARS

---

### I. UPPER RESPIRATORY TRACT

- A. Nasopharyngeal wash/aspirate: Collect 1-2 ml into sterile vial.
  - B. Nasopharyngeal/oropharyngeal swabs: Collect one NP and one OP swabs; use Dacron swabs with a non-wooden shaft. Place one NP swab and one OP swab into the same sterile vial containing 2 ml of viral transport media.
- 

### II. LOWER RESPIRATORY TRACT

Bronchoalveolar lavage (BAL), tracheal aspirate, or pleural tap: Half of specimen centrifuged with cell pellet fixed in formalin. Remaining unspun specimen collected into sterile vials. If the patient is intubated and it is clinically indicated, consider a transbronchial, fine needle or open lung biopsy. For domestic transportation, store and ship on wet ice.

---

### III. BLOOD COMPONENTS

- A. White Blood Cells: If available collect 8 ml whole blood in a CPT tube (Becton Dickinson), centrifuge 1500 RCF. For domestic transportation, ship on wet ice.
  - B. Serum: Collect 5-10 ml of whole blood in serum separator tube. Allow blood to clot, centrifuge and aliquot resulting sera. If serum has already been frozen, ship on dry ice. If unfrozen, ship on wet ice.
  - C. Whole blood: Collect 5-10 ml of whole blood in an EDTA (purple-top) tube. For domestic transportation, ship on wet ice.
- 

### IV. TISSUE

- A. Fixed tissue: Formalin fixed or paraffin embedded tissue from all major organs (e.g. lung, trachea, heart, spleen, liver, brain, kidney, adrenals). Store and ship at room temperature. **\*DO NOT FREEZE FIXED TISSUES\***
  - B. Frozen tissue: Fresh frozen tissues from lung and upper airway (e.g. trachea, bronchus). Specimens should be collected aseptically via biopsy or at autopsy performed as soon as possible after death. Place each specimen in separate sterile containers containing small amounts of viral transport media or saline. Store and ship on dry ice.
- 

### V. URINE

Optimal acute specimen is cell pellet from approximately 50 cc of first void morning urine specimen, re-suspended in 2-3 cc. viral transport medium, tissue culture medium or phosphate buffered saline. For domestic transportation, ship on wet ice.

---

### VI. STOOL

Stool (10-50 cc) should be placed in a stool cup or urine container, securely capped, sealed with parafilm and bagged. For domestic transportation, ship on wet ice.

---

### VII. LABELING AND DOCUMENTATION

1. Specimen labeling: Each specimen should be labeled with the patient ID number and date collected.
  2. Accompanying documentation: The package should include a linelist for all specimens including patient name and ID number, date collected, samples collected, clinical contact name and phone number, and submitter contact name and phone number **OR** a completed specimen submission form available at [www.cdc.gov/ncidod/dvrd/spb/pdf/specsubmission.pdf](http://www.cdc.gov/ncidod/dvrd/spb/pdf/specsubmission.pdf).
- 

### VIII. SHIPPING

1. For US domestic transportation, store and ship all non-tissue specimens on wet ice. Frozen tissues should be sent on dry ice.
2. For international transportation, store and ship all non-tissue specimens on dry ice. Fixed tissues should **not** be frozen.
3. Package according to IATA Regulations as described in the Consignment of Diagnostic Specimens 2003 link that can be found at [www.iata.org/dangerousgoods](http://www.iata.org/dangerousgoods).
4. For domestic U.S. shipments use Delta DASH for same day delivery (1-800-638-7333) or FedEx for next day delivery (1-800-463-3339). International shipments should be done using the best carrier available.
5. Label all packages: **"Diagnostic Specimens. UN 3373. Packed in compliance with IATA packing instructions 650"**.
6. Address the packages to:

**SARS Investigation**

**Centers for Disease Control and Prevention, Viral Special Pathogens Branch**

**1600 Clifton Rd NE (MS G-14), Bldg. 15, Rm. B105**

**Atlanta, GA 30333**

**Phone: (770)-488-7100**

---